LA TEST #11

STATE ONLY, AMENDED, NON RESIDENT, IT540B

FORMS REQUIRED: FORM 1040, IT540B

INFORMATION RETURNS ATTACHED: FORM W-2 (1) NO

THIRD PARTY DESIGNEE:NAME:

TAXPAYER:NAME: LATEST Z CANASTA SSN: 400-00-4317

DOB: 1/4/1985 OCCUPATION: SALES CLERK

DISABLED: NO PRES ELEC FUND: YES DAYTIME PHONE: NO

BLIND: NO 2 HAWTHORN ST ADDRESS:

OTTO CANADA A7P8C6

FILING STATUS: **SINGLE** LINE 6d: 1

INTEREST:STATE: **CANADA** LN 1: 370

SCHEDULE K-1 FOR 1120S: (1) STATE: LA PASSIVE ACTIVITY

S-CORP: BATON ROUGE CRAWDADSLINE 1: 684

1111 RIVER FRONTSTATE TAX W/H:

BATON ROUGE LA 70821 DIRECT DEPOSIT: SAME AS FEDERAL NAME OF INSTITUTION: **COMMUNITY BANK**

RTN:053166111

ACCT#:123456 TYPE OF ACCOUNT: **CHECKING**

PREPARER NOTES:

PLEASE NOTE THAT THIS RETURN IS TO BE SENT TO THE CARE OF ROYAL FLUSH.

E-MAIL ADDRESS:efile@lamis.gov

LA RETURN ONLY:

AMENDED RETURN **CHANGE OF ADDRESS**

NAME CHANGE

DONATION TO MILITARY FAMILY ASSISTANCE FUND

100

LA TEST 11 - STATE ONLY

FORMS INCLUDED: FORM 1040, FORM W-2 (2)	
Form 1040:Taxpayer's first name, initial, last name	LATEST Z CANASTA
Taxpayer's social security number	400-00-4317
Home address (number and street)	2 HAWTHORNE ST
City, state, and zip	OTTO CANADA A7P8C6
Filing status	SINGLE
Line 6a: Yourself (exemption)	X
Number of boxes checked on 6a and 6b	1
Line 7:Total Wages	11000
Line 8a:Taxable interest	370
Line 17:Rental real estate, royalties, partnerships, s-corps	684
Line 19: Unemployment compensation	0
Line 22:Total income	12054
Line 31a:Alimony paid	0
Line 31b:Recipient's SSN	0
Line 36:Add lines 23 through 31a and 32 through 35	0
	12054
Line 37: Adjusted gross income Line 38:Enter amount from line 37	12054
Line 39a:Born before 1/2/1942	no 5150
Line 40:Itemized deductions or standard deduction	5150
Line 41: Subtract line 40 from line 38	6904
Line 42: Multiply \$3300 by the total number of exemptions claimed on lin	
Line 43:Taxable income	3604
Line 44:Tax	363
Line 46:Add lines 44 and 45	363
Line 57:Subtract line 56 from line 46	363
Line 61:Advance earned income credit payments	0
Line 63:Total tax	363
Literal	550
Line 64:Federal income tax withheld	750
Line 66a:Earned income credit	0
Line 66b:Nontaxable combat pay election	0
Line 68:Additional child tax credit	0
Line 72:Total payments	750
Line 73:Overpaid	387
Line 74a:Amount refunded	387
Line 74b:Routing number	053166111
Line 74c:Account type	CHECKING
Line 74d:Account number	123456
Line 75:Applied to estimated tax	0
Third party designee:no	
Designee's name	
Designee's phone number	
Designee's personal identification number (PIN)	
Taxpayer's occupation:	SALES CLERK
Daytime phone number:	BLANK

LA TEST 11 - STATE ONLY

Box b:Employer identification number 41-8765432 Box c:Employer's name, address, and zip code SWEET AROMA HEALTH & BEAUTY AIDS 7 FRAGRANT WAY KANSAS CITY, MO 64188 Box d:Employee's social security number 400-00-4317 Box e:Employee's first name, initial, and last name LATEST Z CANASTA Box f:Employee's address and zip code 2 HAWTHORNE ST OTTO CANADA 1708C6 Box 1:Wages, tips, other compensation 11000 Box 2:Federal income tax withheld 750 Box 3:Social security wages 11000

Box 2:Federal income tax withheld

Box 3:Social security wages

11000

Box 4:Social security tax withheld

Box 5:Medicare wages and tips

11000

Box 6:Medicare tax withheld

160

Box 15:State Employers State ID

MI 4177730001

Box 16:State Wages, tips, etc:

11000

Box 17:State Income Tax

525

LA TEST # 11

2006 RESIDENT RETURN

ADDRESS CHANGE BOX X SOCIAL SECURITY NUMBER 400004317 LATEST Z CANASTA **NAME** PRESENT ADDRESS 2 HAWTHORNE ST CITY STATE ZIP OTTO CANADA A7P8C6 FILING STATUS 1 **EXEMPTIONS:** 1 TOTAL EXEMPTIONS 1

7 FEDERAL AUDJUSTED GROSS INCOME	12054
8 LESS FEDERAL INCOME TAX	363
9 YOUR LOUISIANA TAX TABLE INCOME	11691
10 YOUR LOUISIANA INCOME TAX	143
12 ADJUSTED LOUISIANA INCOME TAX	143
13 CONSUMER USE TAX	NO X
14 TOTAL INCOME TAX AND CONSUMER USE TAX	143
20 AMOUNT YOU OWE	143
21 DONATION TO MILITARY FAMILY ASSISTANCE FUND	100
26 BALANCE DUE LOUISIANA	243

2006 NONREFUNDABLE TAX CREDITS

1 CREDIT FOR TAX LIABILITIES PAID TO OTHER STATES TAKEN OUT

********2006 NON RESIDENT RETURN	
ADDRESS CHANGE BOX	\mathbf{X}
AMENDED RETURN	\mathbf{X}
NAME	LATEST Z CANASTA
PRESENT ADDRESS	2 HAWTHORN ST
CITY STATE ZIP	OTTO CANADA A7P8C6

FILING STATUS	SINGLE
EXEMPTIONS:	1
TOTAL EXEMPTIONS	1

7 FEDERAL AUDJUSTED GROSS INCOME	12,054
8 LOUISIANA INCOME	684
9 RATIO OF LOUISIANA INCOME TO FED AGI	5.67
10A LESSFEDERAL INCOME TAX	363
10B ALLOWABLE FEDERAL INCOME TAX	21
11 LOUISIANA NET INCOME	663
12 YOUR LOUISIANA INCOME TAX	8
14A ADJUSTED LOUISIAN INCOME TAX	8
14B CONSUMER USE TAX	NO
14C TOTAL INCOME TAX AND CONSUMER USE TAX	8
20 AMOUNT YOU OWE	8
21 DONATION TO MILITARY FAMILY ASSISTANCE FUND	100
26 BALANCE DUE LOUISIANA	108